

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: John Trezza

Title: REDUNDANT OPTICAL DEVICE ARRAY

Appl. No.: 09/896,797

Appl. Filing Date: 6/29/2001

Examiner: Agustin Bello

Art Unit: 2613

Conf. No.: 8282

REQUEST FOR CONTINUED EXAMINATION (RCE)

TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. **Submission required** under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

Please enter and consider the amendment and/or reply previously filed on ____.

Please consider the Affidavit(s)/Declaration(s) previously filed on ____ but not considered.

Please consider the arguments in the Appeal Brief or Reply previously filed on ____.

b. Enclosed are:

Amendment/Reply.

Affidavit(s)/Declaration(s).

Information Disclosure Statement.

Form PTO/SB/08 with copies of ____ listed reference(s).

Miscellaneous:

Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$810.00	=\$810.00
Total Claims:	54	-	55 = 0	x \$52.00	=\$0.00
Independents	7	-	8 = 0	x \$220.00	=\$0.00
	First presentation of any Multiple Dependent Claims:			+ \$390.00	=\$0.00
					CLAIMS FEE TOTAL: = \$810.00
					TOTAL FEE \$810.00

The above-identified fees of \$810.00 are being paid by credit card via EFS-Web.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to

Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment instructions in EFS-Web being incorrect or absent, resulting in a rejected or incorrect credit card transaction, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent indicated below.

Respectfully submitted,

Date: August 27, 2009 _____ By: /Marcus W. Sprow/ _____

FOLEY & LARDNER LLP
Customer Number: 23524
Telephone: (313) 234-7150
Facsimile: (313) 234-2800

Marcus W. Sprow
Attorney for Applicant
Registration No. 48,580